United States Senate

WASHINGTON, DC 20510

March 6, 2003

The Honorable
Donald H. Rumsfeld
Secretary of Defense
Department of Defense
1000 Defense Pentagon
Washington, D.C. 20301-1000

Dear Mr. Secretary:

We write to express our strong concern about the potential use of chemical and biological weapons against American forces during any future war with Iraq and the ability of our military personnel to defend against such an attack. The safety of our men and women in uniform must remain a top priority in any future conflict or deployment. We are concerned that, as thousands of active duty and reserve troops are deployed to the Persian Gulf region each week, training and preparedness for confronting the harrowing threat of chemical and biological warfare lags behind the pace of deployment. We call your attention to the enclosed transcript of a recent report on the news program 60 Minutes that questions whether our troops are adequately prepared for a chemical or biological attack.

As this news report and several government reports demonstrate, many experts argue that our military personnel do not have adequate training or equipment to respond to a chemical or biological attack. A July 2002 report by the Army Audit Agency, which is enclosed for your review, concludes that "soldiers in most units reviewed ... weren't proficient in operating and maintaining chemical and biological defense equipment," primarily as a result of poor training. These soldiers' lack of proficiency in maintaining the equipment resulted in essential equipment, including 38 percent of Chemical-Biological Masks, deteriorating to "non-mission capable" states of repair. In addition, the General Accounting Office reported last October that 250,000 of the more than 778,000 defective Battle Dress Overgarment protective suits that the Department of Defense ordered removed from its inventory in May 2000 remained unaccounted for by the Army. The Defense Logistics Agency confirmed that 80,000 gas masks with the wrong filters had been issued to the Armed Forces, and that about 19,000 of these remain in circulation. Suffice it to say, no family will be eager to hear that their loved one was killed because he or she had been issued a mask with the wrong filter.

We are also deeply concerned about the aftermath of any large-scale deployment to or war with Iraq and the long-term effects that such an operation could have on the health of our military personnel. As you know, more than ten years after the end of the Persian Gulf War, we still don't know why so many veterans of that conflict are experiencing medical problems. Of the nearly 700,000 U.S. military personnel who served in the Persian Gulf War in 1990 and 1991, more than 100,000 have suffered from an array of symptoms that have become known as Gulf War Syndrome. These symptoms include chronic fatigue, muscle and joint pain, memory loss, sleep disorders, depression, and concentration problems, among others.

As you know, many Gulf War veterans were exposed to a host of pharmaceuticals, chemicals, and environmental toxins, blowing dust, smoke from oil well fires, and petroleum fuels and their combustion products. In addition, there was possible exposure to chemical warfare nerve agents and biological warfare agents, pyridostigmine bromide pills to protect against nerve agents, insecticides, vaccinations, infectious diseases, depleted uranium, and psychological and physiological stress. Military personnel who are currently being deployed to the region for a possible second war with Iraq can expect to face many of these same conditions. Moreover, given the chronic funding shortages of the Department of Veterans Affairs, and the increasing demand for VA health care services, we may be asking this new generation of soldiers to return home to a system that cannot accommodate the medical fallout of these conditions.

A new complication since 1991 is the much larger number of employees from private contractors who will be in theater. By some estimates, this number could reach 20,000 personnel, or about 10 times the number involved in Desert Storm. These private-sector employees will be exposed to the same environments and face the same risks as military personnel.

We would appreciate a detailed description of the steps that the Department is taking to protect our dedicated military personnel from a chemical or biological attack, including measures to correct the training inadequacies and equipment deficiencies mentioned above. Please include a discussion of training for military medical personnel on how to recognize and treat symptoms of a chemical or biological attack, efforts to improve detection of chemical and biological agents, and information on the availability and condition of chem-bio protective equipment. We urge you to increase the Department's focus on such training and preparedness, including providing adequate funding for the equipment that our men and women in uniform will need to combat these threats in the Persian Gulf and elsewhere. We also request a description of steps that are being taken to protect private employees of Defense Department contractors.

We also request that the Department develop a plan to ensure that the health of American troops deployed to the Persian Gulf region is protected both in the immediate future and in the long term. We owe it to our men and women and uniform and their families to do all we can to prevent another Gulf War Syndrome and to continue to take steps to ensure that those suffering from this illness are adequately compensated for their service and sacrifice.

Thank you in advance for your timely response to this request.

Sincerely,

Russell D. Feingold
United States Senator

Richard J. Durbin United States Senator

Barbara Boxer

United States Senator

Harry Reid

United States Senator

Christopher J. Dodd

United States Senator

Dianne Feinstein

United States Senator

Bolars a. Meluthi

Barbara A. Mikulski United States Senator Blanche L. Lincoln United States Senator